

CITY OF CHIPPEWA FALLS
APPLICATION & PERMIT TO CONSTRUCT, EXCAVATE OR
MAINTAIN WITHIN THE STREET RIGHT-OF-WAY

Contractor: _____
Address: _____

Excavation in: _____ Street
Owner: _____

Location of Work: _____

Lot: _____ Blk: _____ Subdivision: _____

Office Phone: _____

Pavement Type: _____

Plans Prepared By: _____

7 Yr. Moratorium: _____

Plans Enclosed: _____ Yes _____ No

Detour Permit Needed for STH: _____

Fee \$50.00 Tracking # _____

Purpose:

_____ Sanitary Sewer _____ Storm Sewer _____ Water: _____ House to Blvd. _____ Blvd. to Main

Work Location: _____ Street/Traveled Area _____ Driveway _____ Median (Paved) _____ Sidewalk
_____ Blvd/Terrace _____ Alley Other: _____

Method of Installation: _____ Open Cut/Trench Other: _____

Wye Conn _____ feet _____ of MH at _____ & _____
(Direction) (Street 1) (Street 2)

Estimated Starting Date: _____

Documentation:

Liability Insurance: _____ Attached _____ On File and Current

\$3000 Bond: _____ Attached _____ On File and Current

Applicant understands and agrees that the permitted work shall comply with all permit provisions and requirements of the Code of Ordinances of the City of Chippewa Falls, any special provisions listed below or attached hereto, and any and all plans, details or notes attached hereto and made a part thereof.

By: _____ Title: _____ Date: _____
(Signature of Authorized Representative)

PERMIT

The foregoing application is hereby approved and permit issued by the City of Chippewa Falls subject to full compliance by the Applicant with all provisions and conditions stated herein and in the Code of Ordinances of the City of Chippewa Falls and all attachments hereto.

Conditions of Permit: _____

By: _____ Title: _____ Date: _____
(Signature of Authorized Representative)

For City Staff Use Only:

<u>Item</u>	<u>Date Completed</u>	<u>Quantity</u>	<u>Cost</u>
Curb & Gutter	_____	_____	_____
Sidewalk	_____	_____	_____
Driveway	_____	_____	_____
Pavement	_____	_____	_____
Sawcut	_____	_____	_____
Other	_____	_____	_____

Date Billed: _____ Payment Received: _____ Tracking # _____